

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

PATENT Sur 11-19-02 H12

Applicant

: Lino R. Becerra, et al.

Application No.: 09/822,585

Filed

: March 30, 2001

Entitled

: METHOD AND APPARATUS FOR

OBJECTIVELY MEASURING PAIN, PAIN TREATMENT AND OTHER RELATED

TECHNIQUES

Docket No.

: MGH-004BUS

Group Art Unit: 3737

Examiner: S. Shaw

Certificate of Mailing (37 C.F.R. 1.8(a))

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240 CTO2 Date of Signature and Mail Deposit

Christopher S. Daly

Reg. No. 37,303

Attorney for Applicant(s)

RESPONSE

Assistant Commissioner for Patents Washington, D.C. 20231

Dear Sir:

In response to the Restriction Requirement dated September, 24, 2002, Applicant hereby elects the Group I claims (Claims 1-30).

If the Examiner has any questions regarding this amendment or this application, he is respectfully invited to telephone the undersigning attorney.

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The Assistant Commissioner is hereby authorized to charge payment of any additional fees associated with this communication or credit any overpayment to Deposit Account No. 500845.

Dated: 240 CTO2

Respectfully submitted,

Christopher S. Daly

Registration No. 37,303 Attorney for the Applicant(s)

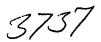
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TRANSMITTAL FORM (to be used for all correspondence after initial filing) First Named Inventor Group Art Unit Examiner Name

MGH-004BUS Total Number of Pages in This Submission Attorney Docket Number **ENCLOSURES** (check all that apply) **Assignment Papers** After Allowance Communication Fee Transmittal Form (for an Application) to Group Appeal Communication to Board Fee Attached Drawing(s) of Appeals and Interferences Licensing-related Papers Appeal Communication to Group Amendment / Reply (Appeal Notice, Brief, Reply Brief) Petition After Final Proprietary Information Petition to Convert to a Affidavits/declaration(s) Provisional Application Status Letter Power of Attorney, Revocation Change of Correspondence Address Other Enclosure(s) (please Extension of Time Request identify below): Return-receipt postcard Terminal Disclaimer **Express Abandonment Request** Request for Refund Information Disclosure Statement CD, Number of CD(s) Certified Copy of Priority Document(s) Remarks Response to Missing Parts/ Incomplete Application Response to Missing Parts In the event a petition for extension of time is required by this paper and not under 37 CFR 1.52 or 1.53 otherwise provided, such petition is hereby made and authorization is provided herewith to charge deposit account No. 50-0845 for the cost of such extension. SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT Firm Christopher S. Daly Reg. No. 37,303 Daly, Crowley & Mofford, LLP Individual name Signature Date CERTIFICATE OF MAILING

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